

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I							SM	IALL	ENTITY		OTHER	THAN
500		· ·	(Column 1)		(Column 2)			YPE		OR	SMALL	
FOR		, NI	NUMBER FILED		NUMBER EXTRA		R/	ATE	FEE	1	RATE	FEE
BASIC FEE							. 3		345.00	OR		690.00
TOTAL CLAIMS			// mi	nus 20=	*	\supset	X	9=		OR	X\$18=	
INDEPENDENT CLAIMS			9 m	inus 3 =	· <		X	39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT						+1	30=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TO	TAL	[<u></u>	OR	TOTAL	090	
	C	LAIMS A	AS AMENI	DED - I	PART II		•	,			OTHER	THAN
		(Columi		(Column 2)	(Column 3)	SM	ALL I	ENTITY	OR	SMALL	
AMENDMENT A		CLAIM REMAIN AFTEI AMENDM	ING R	e P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	R/	ATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent FIRST PRESE	*	Minus	**		=	X	39=		OR	X78=	
-	FINOT FRESE	MATION	OF MOLTIPLE	DEPEN	DENT CLAIN	1	+1:	30=		OR	+260=	
								OTAL		OR	TOTAL	
							ADDIT	r		O	ADDIT CCC	
		(Columi	n 1)	(Column 2)	(Column 3)	ADDIT	r. FEE	<u> </u>	10	ADDIT. FEE	
m		(Columi	IS :	(Column 2) HIGHEST	(Column 3)	ADDI	r. FEE	ADDI-]] [ADDIT. FEEI	ADDI-
ENT B			IS ING R			(Column 3) PRESENT EXTRA		T. FEE	ADDI- TIONAL FEE		ADDIT. FEE	ADDI- TIONAL FEE
	Total	CLAIM REMAIN AFTEI	IS ING R	Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT	RA	<u> </u>	TIONAL	OR		TIONAL
AMENDMENT B	Independent	CLAIM REMAIN AFTEI AMENDM	IS ING R IENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE 9=	TIONAL	OR	RATE	TIONAL
		CLAIM REMAIN AFTEI AMENDM	IS ING R IENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	X\$	9= 9=	TIONAL	OR OR	RATE X\$18= X78=	TIONAL
	Independent	CLAIM REMAIN AFTEI AMENDM	IS ING R IENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	X\$ -13	9= 9= 80=	TIONAL	OR	RATE X\$18= X78= +260=	TIONAL
	Independent	CLAIM REMAIN AFTEI AMENDM	IS ING R IENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	X\$ -13	9= 9= 80= OTAL	TIONAL	OR OR	RATE X\$18= X78=	TIONAL
	Independent	CLAIM REMAIN AFTEI AMENDM * NTATION (Minus OF MULTIPLE	*** E DEPEN	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM	PRESENT EXTRA	X\$ X3	9= 9= 80= OTAL	TIONAL	OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL
C AMENDMENT	Independent	CLAIM REMAIN AFTEI AMENDM *	Minus OF MULTIPLE	P ***	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM	PRESENT EXTRA = =	X\$ X3	9= 9= 30= OTAL	ADDI- TIONAL	OR OR	RATE X\$18= X78= +260= TOTAL	ADDI- TIONAL
C AMENDMENT	Independent	CLAIM REMAIN AFTEI AMENDM * * * * * * * * * * * * *	Minus OF MULTIPLE	P ***	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY	PRESENT EXTRA = = (Column 3) PRESENT	X\$ -X3 +13 ADDIT	9= 9= 30= OTAL FEE	TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE	TIONAL FEE
C AMENDMENT	Independent FIRST PRESE Total Independent	CLAIM REMAIN AFTEI AMENDM * * * * * * * * * * * * *	Minus OF MULTIPLE Minus Minus Minus Minus Minus Minus Minus Minus	DEPEN (()	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = = (Column 3) PRESENT EXTRA = = =	X\$ X3 +13 T ADDIT	9= 9= 0TAL FEE	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18=	ADDI- TIONAL
AMENDMENT	Independent FIRST PRESE	CLAIM REMAIN AFTEI AMENDM * * * * * * * * * * * * *	Minus OF MULTIPLE Minus Minus Minus Minus Minus Minus Minus Minus	DEPEN (()	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = = (Column 3) PRESENT EXTRA = = =	X\$ X3 +13 TADDIT	9= 9= 0TAL FEE TE 9=	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	ADDI- TIONAL
AMENDMENT C AMENDMENT	Independent FIRST PRESE Total Independent FIRST PRESE	CLAIM REMAIN AFTEI AMENDM * * * * * * * * * * * * *	Minus OF MULTIPLE Minus Minus OF MULTIPLE Minus Minus OF MULTIPLE	DEPENI (()	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM	PRESENT EXTRA = = (Column 3) PRESENT EXTRA = = =	X\$ X3 +13 ADDIT RA X\$ X3 +13	9= 9= 0TAL FEE TE 9= 9=	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78= +260=	ADDI- TIONAL
AMENDMENT C AMENDMENT	Independent FIRST PRESE Total Independent	CLAIM REMAIN AFTEI AMENDM * * NTATION (CLAIM REMAINI AFTEI AMENDM * * NTATION (mn 1 is less inber Previous	Minus OF MULTIPLE Minus Minus OF MULTIPLE Minus Minus Minus Minus Minus Minus Minus	DEPEN THIS SP	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM Column 20 ACE is less that	PRESENT EXTRA = = (Column 3) PRESENT EXTRA = = = olumn 3. an 20, enter "20."	X\$ X3 +13 ADDIT RA X\$ X3 +13	9= 9= 0TAL FEE TE 9= 0=	ADDI- TIONAL	OR OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	ADDI- TIONAL